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Exploring if social support has an impact on men's experiences with male mental health stigma: a thematic analysis

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ABSTRACT

This study was carried out with the aim to bridge the gap between previous research and provide insight into social support and male mental health stigma. The present study explores the thoughts and experiences of the potential impact of social support on male mental health stigma. Semi-structured interviews were carried out to maximise the detail on experiences of male mental health stigma, and of the different ways that social support could reduce any stigma perceived. Thematic analysis was implemented to analyse the data along with the epistemology of Interpretative Phenomenological Analysis (IPA) in order to gain a better insight into the participant's lived experience. Four main themes were identified and within the themes, there were sub-themes. The findings were interesting, and have left ample room for further research to be conducted into the different aspects of social support that can alleviate stigma.

KEY WORDS:	STIGMA	SOCIAL SUPPORT	INTERPRETATIVE PHENOMENOLOGICAL ANALYSIS	THEMATIC ANALYSIS	MALE
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Introduction:

Male suicide rates are approximately three times that of female suicide. This has pushed psychologists to explore the factors contributing to poor male mental health, including the role of social support in promoting well-being.

Despite there being a large research base for social support and male mental health separately, the literature on how the two interact with one another is thoroughly lacking. The present study will aim to help fill the gap in the existing literature by exploring how social support can affect men's experiences with male mental health stigma. This is carried out by examining the efficacy of social support and how it can differ, how social norms interact with the individual and how they can lead to stigmatisation.

The role of social support can be very important to an individual as it often leads to 'positive psychological consequences' (Haslam et al, 2009). It is suggested, therefore, that if a man belongs to a social group that collectively combat male mental health stigma as individuals, that support will be reciprocated within that group (Kearns et al, 2015). However, Colarossi and Eccles (2003) argue that not all forms of social support operate in the same way because the effectiveness of support relies on the traits of both the support provider and receiver.

Nevertheless, if the support is effective then the benefits are highly significant as it can lead to increased self-worth, self-efficacy as well as aiding in cognitive development (Colarossi and Eccles, 2003). In addition, Kearns et al (2015) assert that advice received from an in-group member with relevant personal experience is more accepted than an un-relatable out-group member. This further enforces the importance of social support groups because they can empower individuals to be more open with other members of the group.

Furthermore, Naslund et al (2016) argues that social media can provide a new form of peer-to-peer support. This is because individuals with serious mental illnesses are beginning to form communities online to talk about their experiences with their illnesses, seek advice as well as supporting each other. It is also suggested that social media helped those individuals to feel less alone and more supported as they were able to find others with similar experiences and because of the support given online, members then found it easier to communicate about their illness in face-to-face interactions (Naslund et al, 2016). This could indicate that the role of social support is evolving and is therefore reaching and aiding more people than before.

However, the role of social support can change drastically when in relation to men. Schulz (2016) found that, for new fathers, the level of perceived support is lacking since they predominately only rely on their partner. This stems from fathers beginning to feel excluded when family and friends overlook how he is coping with parenthood (Schulz, 2016).

Furthermore, Colarossi and Eccles (2003) found that the level of support given to a man can be influenced by society's perception of a man's need for support, which is perceived to be very little. It is also suggested that men's social support operates differently than women's because women report being more open with friends and family whereas men are more likely to engage in shared activities with other men and not engage in conversation about emotions (Colarossi and Eccles, 2013). It could be implied that the difference in forms of social support may be because men do not necessarily feel comfortable with disclosing feelings with other men and would rather disclose to a female friend (Colarossi and Eccles, 2003).

A further reason for the difference in social support for men and women could be the role of social norms, which are; the standards and expectations within society that can dictate a person's behaviours, first proposed by Sherif (1936 cited in Mahalik et al, 2003). Norms can then

dictate how support groups operate which in turn, can create stigma within support groups, which will be explored later.

Norms are often learnt through socialisation, which is the process that teaches individuals from a young age what is expected of them through interactions and observations (Mahalik et al, 2003). As the individual learns the norms and values of society, they also learn gender associated norms, which result in different expectations from the genders. For example, expectations of a man are to avoid emotions and vulnerabilities, a man must have power and control in order to prove masculinity as well as doing financially well (O'Neil, 1990). One way that an individual will internalise gender role norms is through the observation of other members of their gender (Mahalik et al, 2003) and learning from that observation. For example, a man may be told that wearing pink is wrong (Mahalik et al, 2003), that boys do not cry and should not express emotion (Mahalik et al, 2003; Schulz, 2016).

It is arguable that the gender role norms can be incredibly damaging and lead to stigmatisation. This is because gender is often an integral part of a person's identity so if they do not relate to the norm, their identity is threatened. Statements such as; 'be a man', 'toughen up princess' and 'they're playing like girls' (Schulz, 2016:103) suggest to men that it is wrong of them to feel vulnerable or behave in a way that is seen as stereotypically feminine. Because of the idea that it is wrong for a man to be feminine, men are forced to maintain a unemotional self-image, even when they truly feel the opposite for fear of being humiliated by their support groups (OliFFE et al, 2013).

The stigma surrounding male mental health can be incredibly complex, and once internalised can be strikingly damaging to an individual. This can, in part, be due to a man not conforming with the gender role norms of masculinity because when a man feels that they cannot relate to the societal expectations of a man, then it is common for him to fear appearing weak (OliFFE et al, 2013; Lawlor and Kirakowski, 2014; Schulz, 2016). Stigma is associated with reduced self-esteem, quality of life, hope, self-efficacy, to name a few (Lawlor and Kirakowski, 2014; Naslund et al, 2016). Stigma was conceptualised by Goffman (1963, cited in Yang et al, 2007) who believed, in his classical paper that stigma is a characteristic that is disapproved of by society. Stigma also materialises through a dichotomy between how an individual is expected to behave by society and the individual's actual characteristics (Goffman, 1963; cited in Yang et al, 2007). Clement et al (2015) argued that there are further forms of stigma, such as; anticipated stigma, internalised stigma, perceived stigma and treatment stigma, all of which are relevant here. Any of these forms of stigma can inhibit an man from seeking help, in a personal or professional setting. This is because stigma can often invoke feelings of shame and in an effort to combat that shame, the individual becomes secretive as by not disclosing their problems. However, this secrecy is not necessarily due to a fear of rejection or humiliation but instead, because they deem themselves unworthy (Lawlor and Kirakowski, 2014). OliFFE et al (2013:76) argues that depression is viewed as a 'feminine affliction' and when men began to feel depressive symptoms, they often tried to escape them and engage in dangerous and risk taking activities instead to try and assert their masculinity (OliFFE et al, 2013). Interestingly, OliFFE et al (2013) raised the point that even when some men acted out in anger, their behaviour was not seen as a cry for help but as a further enforcement of masculine ideals and was therefore normalised. The normalisation of such behaviours is an example of the warped expectations from men because instead of such behaviours causing concern, they are accepted.

Furthermore, Corrigan (2004) proposed that stigma may inhibit an individual from seeking help through two pathways. Firstly, the individual may not want to carry the label that help seeking and diagnosis often brings so they will avoid help seeking in order to avoid public stigma. Secondly, the individual may wish to avoid the internalised stigma which can bring about feelings of embarrassment, shame and weakness. Therefore, when formal help-seeking is viewed as a threat to an individual's emotions and perception, then it is more likely to be perceived negatively (Lannin et al, 2015).

The Present Study

Past studies, for example Chandra and Minkovitz (2005); Kearns et al (2015), have used quantitative methods but the present study will use qualitative methods in the form of semi-structured interviews in order to understand the individuals' perspective on the phenomenon more in-depth. The epistemological grounding for the present study is Interpretative Phenomenological Analysis (IPA), which is the 'philosophical approach to the study of experience' (Smith et al, 2012:11). IPA is the epistemology that places its focus on the lived experience of the individual (Smith et al, 2012), whether that be everyday occurrences or a significant life event. It also requires the researcher to collect detailed first person accounts from the individuals (Larkin and Thompson, 2012) which is why it is most suitable for qualitative data. Using IPA as a viewpoint for the present study is appropriate because of the emphasis on the experience of an individual, because an individual's experience is reflective of their thought processes, perspectives and how they find meaning in the world (Smith et al, 2012).

Overall, the present study aims to explore the impact of social support on men's experience with mental health stigma.

Methodology:

The rationale of the study is to shed light on the potential impact that social support can have on men's experiences with male mental health stigma. Because the interest of the study is to explore the experiences of men, it became clear to use qualitative methods. This is articulated through the work of Bryman (cited in Harding, 2013:10) who suggested that some of the underpinnings of Qualitative methods are; naturalism, where the researcher will observe a participant in a natural setting in order to obtain the most honest results possible; holistic approaches; and the want to see through others' eyes, which allows the researcher to try to properly understand the viewpoint of another. This is further enforced by Flowers et al (2000), who agrees that the focus of most qualitative studies is the participants' understanding of the studied topic.

The data was collected through semi-structured interviews. These were in-depth in order to understand the persons' thoughts and motivations (Hennink et al (2011)). The design of the research is rooted in Phenomenology, as the focus of the research is on the participants' lived experiences and linking that with their feelings surround male mental health stigma. This relates closely with Phenomenology as Smith et al (2012:1) asserts that Phenomenology is the 'philosophical approach to the study of experience'.

Hennink et al (2011) enforces further the utility of interviews as they give an insight into the persons' decision making, how they attach meaning to experiences whilst also giving the

researcher the ability to cover sensitive topics and obtain a wider picture of the persons' life through further questions. Although interviews can be viewed as less 'naturalistic' (Harding, 2013:22), the researcher has to spend a substantial amount of time with the participant and therefore is able to obtain more knowledge of their life and situation. Flowers et al (2000) affirms that the interviewer's role is to build rapport as well as maintaining trust throughout the interview and make an effort to follow the participants through their explanations of their experiences. This could be through asking for extra information, or asking why the participant feels that way or how they feel about an experience.

Before any data was collected, the present study was subject to ethical approval (Appendix 1), this then allowed me to begin the interview process. In order to carry out the study in an ethical manner, the data was anonymised using a pseudonym to protect the individuals' identity. Confidentiality could not be promised since it was necessary to quote the individual's exact words. The audio files of the interviews were protected until the data analysis was complete. After that, they were destroyed. The participants were given the right to withdraw their data.

An interview schedule (Appendix 2) was used to help to guide the conversation but still enabled for extra topics and questions to arise.

Before the interview began, the participant was given a Participation Information Sheet (Appendix 3) as well a Consent Form (Appendix 4) to read through and then were given the opportunity to ask any questions for complete transparency. The interview was held in a previously discussed neutral area to ensure the safety of the researcher and participant. The interview was recorded using an audio recording device to assist with the transcription process. Once the interview had ended, the participant was given a de-brief sheet (Appendix 5) to read and sign after any questions were answered and an anonymous personal code was created.

For this study, 6 participants were used and were recruited through opportunity sampling. Karmez (cited in Smith, 2012:103) argued that the main purpose of a qualitative study is for 'developing your emerging theory, not for representation of a population or increasing the generalizability of your results'. The participants used in this study were all male, ranging in ages from 19-46, with the average age being 25 and were from various socio-economic backgrounds. This included students, unemployed, self-employed and employed individuals.

The participants were chosen through opportunity sampling. However, an important aspect of the recruitment process was that the participants must not be a student taking part in a Psychology degree. This was an effort to reduce any chance of the participants already have a significant understanding of social support in the hope to obtain more organic answers. Therefore, opportunity sampling was an appropriate method of sampling in order to pick the most suitable participants. Further exclusion criteria was that the participants must not identify with anything other than male and have no history of mental health issues.

Thematic Analysis (TA) (Braun and Clarke, 2006) is used to analyse the collected data. TA is a method used for 'identifying, analysing and reporting patterns (themes) within data (Braun and Clarke, 2006:79). This is an appropriate method of analysis because TA is useful for summarising important features from an in-depth data set with lots of data to analyse whilst also producing unexpected insights (Braun and Clarke, 2006).

Braun and Clarke (2006) assert that a further advantage of TA is that it is not embedded in one set theoretical framework, which then gives the researcher the flexibility to apply their preferred epistemology to TA. For the present study, the analysis will be used in conjunction with IPA (Horton-Salway, 2007). This is because IPA is interested in looking in-depth at the lived experiences of the participants as well as their perception of the world (Smith and Osborn, cited in Smith, 2014).

There are six phases involved with TA (Braun and Clarke, 2006). These are; (1) to become immersed in the data, which includes transcribing the data, re-reading the transcripts and search for meaning. This is time consuming however, which is a practical aspect to having a smaller sample size (Braun and Clarke, 2006). After becoming very familiar with the data, initial codes should be generated (2). Codes are an aspect of the data that is interesting to the study, and any potential themes should be coded. I found it useful to physically write on the transcripts in order to code accurately. Once the transcripts are coded, then themes should be identified (3), which begins with searching for themes and joining relevant codes together that fit into overarching themes. A thematic map was also used as it is a clear visual aid for identifying themes. The next phase (4), is to review the themes identified and refining them. Then (5), they are named, further refined and an sub-themes are identified and named. Finally (6), the report needs to be produced, where sufficient evidence is provided in order to have clear analysis. For an example of an annotated transcript, please see Appendix 6.

Analysis + Discussion:

The participants gave an in-depth account on social support and mental health stigma. Their accounts were mainly retrospective regarding the topic because the discussion was aimed at any past or present experiences with mental health stigma and social support groups. The interviews lasted between 20 to 30 minutes.

From carrying out thematic analysis of the transcripts, many overarching codes were identified within the data. From these, the following four themes were chosen. Theme 1, 'the role of the traditional male', includes the subthemes of 'traditional characteristics' and 'relevance of characteristics to individual'. Theme 2, 'membership' of social support group involves the 'pro-active membership'. Theme 3 is the 'different forms of support' with the subthemes of 'social or supportive role' and the 'positive and negative' aspects of both social and supportive groups. Finally, theme 4 is the 'presence of a role model'. The chosen themes will be analysed through an Interpretative Phenomenological Analysis viewpoint whilst also using thematic analysis, where the contingencies of the lifeworld will be explored with the data. The contingency of embodiment runs throughout the data, as embodiment is the interaction between the experience and the individual's body. This can include emotions and gender, which is one of the main focuses of the present study.

Theme 1: The Role of the Traditional Male

This theme was a core theme throughout the data because of the homogeneity of descriptions of the traditional male and how said characteristics affected them in everyday life. The subthemes within this are 'traditional characteristics' and 'relevance to individual'. All participants were asked to answer 'what qualities do you think that a traditional man has? The first thing that comes to mind' and all participants agreed that a traditional male should be strong, in both a mental and physical sense. Because of the similarities between the data, it

could be argued that the participants are engaging in an intersubjective experience. Smith et al (2012:17) explain intersubjectivity as the 'shared, overlapping... nature of engagement in the world'. In relation to the present study, intersubjectivity could explain the relatedness between participants and give them a way of communicating and making sense of the situation. For example, some comments on the characteristics of a traditional male are:

TR

'emotional robustness' (Line 3)
'be more head strong' (Line 10)
'for a man you are like confident and strong' (Line 16)

PS

'breadwinner' (Line 4)
'men are supposed to be physically strong and mentally strong and women are often seen as weak and emotional' (Lines 21 – 22)

LDF

'strong... carries the world on his shoulders but doesn't let it get to him... physically fit, strong... that unwavering strength is always there' (Lines 3-4, 6-7)

GP

'more physical traits I reckon like the look of the strong rather than being mentally strong' (Lines 12 – 13)

Here, it is clear that the men all agreed that a traditional male is physically strong and some agreed that he would be mentally strong. From these views, it is evident that there has been a high precedent set for anyone viewing the traditional male as a role model, and this can be incredibly damaging should the individual should fall short of these high standards. The word 'strong' is mentioned numerous times throughout the data and by all participants. It could be suggested that this is an internalisation of social norms. O'Neil (1990) argues that one social norm for masculinity is that it revolves around power and control, which connotes heavily with being 'strong'. Despite O'Neil (1990)'s research appearing to be somewhat outdated, there were a number of links between it and the data collected in the present study so therefore was deemed relevant.

Furthermore, Schulz (2016) states that men are less likely to report symptoms of depression, such as sadness, due to the social norms and characteristics surrounding a traditional male and expression of emotion. Therefore, experiencing an emotion like sadness would not match the image of the traditional man, so the emotion would be hidden.

Following on, the other subtheme for this theme is the 'relevance to the individual'. It was highly important to collect this information in order to assess how the characteristics of the traditional man relates to men living their everyday lives. Surprisingly, the data from the present study somewhat contradicts that of Schulz (2016) in that the participants were not as strongly affected as Schulz (2016) had suggested. A key aspect of this contrast is whether the participant has perspective on their feelings and experiences. Participants were asked if they related to the characteristics that they mentioned and all answers were 'no'. A follow up question was 'and how do you feel about that?'.

JB

'it doesn't really affect me I feel it's more accepted to be like not the stereotypical gender' (Lines 15-16)

PS

'no... I don't agree with them... I have grown up and have perspectives on things... I've learnt lessons not to listen to societies norms and what they think I should do (Lines 34-35)

JL

'You do try and hide it in school because you're scared of being called a wimp or a girl' (Lines 20-22)

'when I started sixth form and I started to grow up a bit... I was able to show emotion a bit more... I wasn't as scared to show it and scared of what everyone would say'

'you're told not to cry when you're young... you're expected to like argue and fight and play sports' (Lines 34-36)

TR

'It's not judged as seriously... I do think that not enough is being done but there are campaigns now saying that it's okay not to be okay' (Lines 19-21)

The perspective that is mentioned here seems to be very important to the effect that traditional characteristics can have on an individual. There also seemed to be little effect on the participants. Embodiment occurs here, as the participants are actively relating the situation to their gender and drawing comparisons between themselves and the traditional male.

The statement by JL referring to being influenced to play sports is enforced by Oliffe et al (2013) and the 'Risk- Reliant Man'. With this type of man, it is common to partake in activities that stimulate daring and risk-taking characteristics in order to escape negative emotions.

A further statement from JL highlights the negative connotations tied to seemingly feminine traits when related to traditional male norms. This is when he is frightened of being called a 'wimp or a girl'. By grouping the two words together, it is suggested that being a wimp and a girl are interlinked. Also, because 'wimp' is slang for being weak it is clear that he was trying to avoid being viewed as anything other than traditionally masculine. This is reiterated by Schulz (2016).

However, the findings from the data are also in contrast to Schulz (2016) and Vogel et al (2013) who stated that men typically found help-seeking difficult because of the dichotomy between talking about their emotions and traditional male characteristics. Although these two studies were based on gaining help through a therapy setting and the present study is focussed on help-seeking in social support, the findings can still be contrasted. A reason for this contrast could be that attitudes towards male mental health stigma are changing. For example, as TR mentioned, campaigns such as 'Heads Together', 'Time to Change' and 'Find the Words' all strive to create a more accepting perception of mental health and in turn, may be working to decrease stigma.

Theme 2: Membership of Social Support Group

This theme was common throughout all transcripts. This is because it is believed that an individual is more likely to discuss emotions with members of the same in-group (Kearns et al, 2015) and in order to find the correct in-group, the individual must pro-actively seek out their support.

PS

'I actively seek out the right people to support me.' (Line 48)

'I'm after an objective point of view... I need somebody separate from the situation rather than a mate putting their arm around me.' (Lines 53-56)



JB

'I think the people who I surround myself with are always people I feel I could talk to and would never be friends with someone who wouldn't be there for me.' (Lines 104-106)

TR

'I've chosen more mature friends... my best friend at uni I wouldn't go to him and speak about it because he's basically still a child.' (Lines 82-86).

From the data, it is clear through the discourse that the participants are active in their choosing of suitable in-group members by the language used. For example, 'actively seek', 'I have chosen' and 'the people I surround myself with'. The language would suggest that time and effort has gone into selecting the right person to confide in. All participants were vocal with this. This finding was an unexpected yet highly valuable one. When related to traditional male characteristics, it is logical to assume that an individual will take extra effort to find the correct person to confide in when they are effectively going against norms. Again, intersubjectivity occurs here because the individuals are exploring how they relate to others in order to communicate effectively.

Theme 3: Different Forms of Social Support

Within this theme, there are two subthemes, whether the group is identified as 'social or supportive' and the 'positive and negative aspects of social support groups'.

Firstly, the subtheme of 'social or supportive' will be explored.

GP

'I used to play hockey so I suppose that was supportive... the time would just fly when I played' (Lines 50-51)

TR

'funnily enough, it's the close ones that you're scared of telling but they're the ones that don't give you a reaction' (Lines 71-73)

LDF

'I have several main social support groups... and then I have other social groups that I am a part of but I don't use for social support' (Lines 110-111)

'sometimes when you're in the company of women or family members... issues with mental health and how you're feeling are more easily received sometimes rather than the traditional male centred groups' (Lines 37-40)

PS

'I still have friends that I relate to but I just wouldn't go to them for support' (Line 59)

Again, this theme was not one that was expected but was incredibly interesting. A suggestion for future research could be to focus more on the distinction between what characterises a social group and supportive group. By analysing the data, it became clear that there is a distinction between social groups and supportive groups and that not all social groups are supportive. This further enforces the notion that it is crucial to have an in-group in order to have support. Research from Keans et al (2013) suggests that a reason why some male based social groups may not be supportive is because some men may find it difficult to talk about mental health and emotions because they are going against male social norms to not talk about anything seen as non-masculine. This is further enforced by Mahalik et al (2003) who stated that gender role norms can be learnt through behaviours, so if men within the social group do not openly talk about emotions, then others will also stay quiet.



With GP's statement, it shows that temporality within the lifeworld occurs here. Temporality is where the individual's grasp on time or geography is affected when carrying out an activity (Ashworth, 2013). Due to GP's lack of awareness of time passing, it could be suggested that supportive groups have the ability to allow the individual to lose track of life for the duration of the activity.

Throughout the data, the positive and negative aspects of social support were mentioned.

LDF

'those groups can sometimes shun the idea of male mental health issues and not want to talk about it' (Line 29)

PS

'with my family... there's an expectation of me being the rock and people rely on me... so seeking support from there is kind of contradictory to how my role is viewed within that set-up' (Lines 41-43)
[in catering] 'there was a lot of 'just get on with it' and 'you're letting the team down'... mental health just wasn't talked about' (Lines 66-68)

JL

'it's helped me to be more confident and sure of myself' (Line 62)

TR

'it definitely shapes you as a person like the next time that a similar situation comes about or same opportunity to talk... you really do look at it differently and with more perspective' (Lines 92-95)

GP

'we all get like a time out from life and stress and we can just chill together' (Line 94)

Overall, it seems that social support has a number of positive and negative aspects. The negative aspects can be detrimental, as such with PS, who cannot rely on his family for support. Because his family see him as a 'rock', he is forced to retain the masculine value of being strong so that his family do not begin to doubt his role within the family. This can be very damaging, since the family is one of the main forms of social support (Romero et al, 2015).

However, it could be argued that once the individual has been pro-active and found the most suitable supportive group for them, the benefits of social support far outweigh the limitations. This is seen when Naslund et al (2016) found that individuals with mental illnesses were pro-active and found their social support groups online. This then led to an increase in promotion of new opportunities for recovery as well as increasing mental and physical wellbeing.

Theme 4: Presence of a Role Model

It is evident that the presence of a role model is crucial within a social support group. It is suggested from the data that a role model can give the individual more one-on-one support and therefore enhance their experience within that group.

TR

'yeah it was my personal tutor at uni' (Line 34)
'she has obviously gone through uni before and she knew how I'd most likely be feeling and she could give me tips on how to deal with stress and that' (Lines 50-52)

JL

'the older hockey lads help me a bit... I suppose I do look to them for guidance'
(Line 65)

'I can chat to them because they've probably been through the same stuff as me
and it's the same with my parents because they've probably done the same stuff
too' (Lines 65-66)

Here, it is clear that in order for an individual to become a role model, there must be a very strong bond between the receiver and giver of support. This is shown through both TR and JL stating that they identify with their role models because they have already had experience with what the men are dealing with. This again could be intersubjectivity coming into play due to the related nature of the experiences and the fact that both individuals can bond over them. This is further enforced by Ricard and Pelletier (2016) who state that there is a need for relatedness between individuals in relation to reciprocal support.

The relevance of the role model is a highly important aspect of social support. It was not fully explored in the present study so for future research, it could be suggested that this is analysed further.

Another point to note is the general view that social support is not an aspect of life that the participants would invest a lot of attention to.

JL

'I've never really thought about how important social support is to me' (Line 110)

LDF

'If I'm talking about my feelings then I'm not really thinking about which social
support group I'm going to' (Lines 58-59)

This relates strongly with Husserl (1927 cited in Smith et al, 2012) who believed that everyone within society is too busily engaged with activities and take for granted the ways of the world. This point was not heavily explored within the present study, yet it seems to be a highly important aspect within social support. This is because the individual may not understand the true meaning of social support, and therefore not understand the many benefits that accompany it.

Limitations

The present study could be subject to a number of criticisms. Firstly, only obtaining data from 6 participants could be viewed as a lack of a generalisable sample. This could also be said about the sample comprising of predominantly young males. Despite the sample size being justified by earlier research, a suggestion for further research could be to obtain data from a larger sample and possibly uncover new themes.

Secondly, the nature of my sample can also be criticised. This is because I obtained my results from mostly young adult males, most of whom had either just left university or were still an undergraduate. This could have led to more a flexible and relaxed dataset because those participants have grown up in a more modern environment. Therefore, if an older sample were interviewed, there could have been a different overall outcome.

Finally, the present study lacked a pilot study. In retrospect, a pilot study would have been highly beneficial due to there being an issue with one of the questions asked in the interview. However,



after the first participant, measures were put into place to make sure that the participants understood what was being asked of them.

Furthermore, the lack of a focus group discussion could cause concern. This is because this study is focussed on the meaningfulness of social support when in relation to male mental health stigma, so it would have been beneficial to experience a social support group interacting with one another.

Summary:

This research aimed to explore the effect of social support on male mental health stigma and men's experiences. It has gained an insight into a number of aspects of the study, but namely has provided insight on the role of social support in reducing male mental health stigma. The findings from this study suggest that social support can have a positive effect on men's experience's with male mental health stigma, if they find the correct person to connect with. Also, this study has acted as a medium between the present study and future research. This is clear through recommendations for other interesting phenomenon's that could not be explored in this study. For example, the relevance of a role model is an important aspect of social support and would be interesting to see findings from potential future research. Overall, the present study has aided in finding ways to empower men to open up about emotions and express themselves in effective but safe ways.

Reflexive Analysis:

Being reflexive is the process where researchers become conscious of and reflective of how they have conducted their research and is often seen as a crucial aspect of a study (Landridge, 2007). Reflexivity is also highly important when researching vulnerable individuals (Landridge, 2007) and although the individual's involved in the present study were not vulnerable, the topic of mental health was one of the main focuses, which can be potentially sensitive. Using information from Langridge (2007) about reflexivity, I will explore how my personal, for example, my background, and epistemological perspectives influenced the findings of the present study.

From exploring my individual perspective on this phenomenon, I am aware that my passions and beliefs will have shaped my study. This is because the motivations for carrying out this study was due to the high suicide rates for young men, as well as individual's that I am close to feeling like they cannot reach out for help. Therefore, I hoped to shed some light on why men often do not seek help when they need it. Also, I hoped that, by carrying out this study, I would be able to encourage men to speak to people within their social support groups, as it can be frightening to be involved with the formal route of counselling. I cannot relate to these men as I am a women and do not feel the pressures to stay emotionless. However, I am able to empathise and that was a reason why I wished to carry out this research. I am highly passionate about this topic, so therefore could not have carried out an objective study. It could be argued that because of my passion about male mental health stigma and social support, I may not have explored the further ways of how to break the mental health stigma as thoroughly as possible. This may have been due to myself wanting to find a way to relate to individual's struggling with mental health issues and influence them to talk about it rather than feeling shame for something out of their control.



Upon reflection, I may have influenced the research by being friends with and knowing the participants. This could have affected the research in the way that the participants may have opened up more to me, or may have not told the whole truth. However, this is a risk with most qualitative studies since they rely heavily on the participant's own words.

It is of paramount importance to note that no research is conducted without a form of personal or epistemological bias as this is the driving force behind all research.

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